PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN SMALL ENTITY		
T	OTAL CLAIMS	•	-۳		·			RATE	FEE	7	RATE	FEE ·	
P	OR .	MUMBER FILED		MANUS REGISER			Basic Fe	€ 385.00	OR	Basic Fee	770.00		
	OTAL CHARGE	ABLE CLAIMS	≪ minus 20°					XS 9+	<u></u>	OR	X\$18=		
	DEPENDENT C		/ minus'3 =					X43-		OR	X86=		
L	AULTIPLE DEPENDENT CLAIM PRESENT							+145=	Ŀ	OR	÷290=		
1.	If the difference in column 1 is less than zero, enter "O" in column 2							TOTAL		OR	TOTAL	770	
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMALL	ENTITY	OR	OTHER SMALL		
TA TA		CLABAS REMAINING AFTER AMENOMENT		PREVIO	ESY BER AUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL IFEE	
	Total	. 20	Minus	20	5	0		XS 9=		OR	XS18=		
ARE	Independent	· つ	Minus		C1 4134			X43=		OR	X86=		
-	PINST PRESE	AST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145=		ОЯ	•290±		
ŀ	• • • • • • • • • • • • • • • • • • • •							YOTAI NOOIT. FEE		OR	YOTAL ADDIT, FEE		
\ <u> -</u>		(Column 1)	<u>r</u>	(Colum		(Calumn 3)	,	·	1.22				
)E		REMAINING AFTER AMENDMENT		PREVIO	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
MOMENT	Total	- 19	Minus	-7	0	- /		XS 9=		OR	X\$18=		
A SECTION	trospendent	1- '3	Minus		<u>チ_</u>	·/		X43=		OR	X86=		
┞	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /						' [+145=		OR	+290=		
1	1114/0	(Column 1)	•	(Colum	n 2)	(Cotumn 3)	^	TOTAL DOIT, FEE		OR	YOTAL ADOIT, FEE	1.	
EMC		CLAINS REMAINING AFTER AMENDMENT		HUGHE NAJME PREVIO PAID F	ER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE	
AMENDME	Total	. 20	Minus	- ð	0	·B		25 9-		OR	X\$18=		
AME	independent	NTATION OF M	Minus	ENDENT	CI AIM	6		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	1	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. * "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 2, enter "2." ADDIT. FEE ADDIT. FEE													
<u> </u>	The "Highest Number Previously Paid For" (Total or Independent) is the highest number tound in the appropriate box in column 1. FORM PTO-615 CMV 10031- Priors and Yesterman Crick, U.S. DEPARTHEBUT OF COMMERCE												